

The Honorable Lauren King

**UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
AT SEATTLE**

STATE OF WASHINGTON, et al.,

Plaintiffs,

v.

DONALD J. TRUMP, in his official capacity
as President of the United States, et al.,

Defendants.

NO. 2:25-cv-00244-LK

DECLARATION OF KYM AHRENS
IN SUPPORT OF PLAINTIFFS'
MOTION FOR CONTEMPT,
SHORTENED TIME, AND
ATTORNEYS' FEES

NOTE ON MOTION CALENDAR:
Friday, March 14, 2025

ORAL ARGUMENT REQUESTED

I, Kym Ahrens, declare as follows:

1. I am over the age of 18, competent to testify as to the matters herein, and make this declaration based on my personal knowledge.

2. I am a physician and public health researcher. I am a Professor in the Division of Adolescent Medicine at the University of Washington School of Medicine and am jointly appointed at Seattle Children's Hospital and Research Institute. I have a clinical and research practice at Seattle Children's Hospital. I am a Board-Certified in Pediatrics and Adolescent Medicine, and hold a Master's Degree in Public Health. I have been practicing medicine for 23 years and have more than a decade of both research and clinical experience with transgender adolescents.

1 3. I am the Principal Investigator for Grant No. 5R21HD107311 awarded by the
2 National Institutes of Health (NIH) within the U.S. Department of Health and Human Services.
3 The grant recipient for this grant is Seattle Children's Hospital. The federal award project title
4 is "An intervention to promote healthy relationships among transgender and gender expansive
5 youth." The term "transgender and gender expansive" refers to youth who identify as a gender
6 other than their sex assigned at birth. Hereafter, I will refer to this group as "transgender youth."

7 4. Seattle Children's Hospital is the grant recipient and a provider of gender-
8 affirming care and health education, which this grant investigates.

9 5. The Project Period on this grant was originally September 5, 2022, to August 31,
10 2025, and the total award was \$456,997. The research funded by this grant is now in its final
11 stages, when the healthcare deliverables we have been developing are due to be finalized. This
12 NIH grant supports multiple children, investigators and research personnel.

13 6. The research study is designed to improve the delivery of healthcare, through
14 health education and skills training for transgender youth. Research shows that transgender youth
15 frequently face barriers in accessing scientifically accurate, clinically appropriate, and gender-
16 affirming sexual health information and counseling. Transgender youth disproportionately
17 experience disparities in sexual health, including higher rates of HIV and sexually transmitted
18 infections, intimate partner violence, and unintended pregnancy. This research study is designed
19 to develop a healthcare intervention that will improve access to gender affirming information
20 and training to transgender adolescents, thereby improving the delivery of gender-affirming care
21 to these youth.

22 7. The healthcare delivery tool we are researching and developing involves both
23 education and skills training, like the types of training used in some mental health interventions.
24 It has involved a national advisory board of transgender youth and research to develop a health
25 education/skills delivery tool that is socially feasible and responsive to the needs of transgender
26 adolescents. The online tool we are developing is designed to better enable transgender and

1 gender-expansive youth to set healthy boundaries in personal relationships, thus mitigating their
2 risks of violence, mental health disorders, and sexually transmitted infections.

3 8. Research of this kind involves the provision of healthcare as a part of the research
4 itself. For example, in this project we plan to conduct a randomized study with 40 youth, 30 of
5 whom will be given the intervention we are developing and 10 of whom will initially be given a
6 control (but will then be provided with the intervention after the trial ends). This is not unlike
7 the development of a drug or a procedure in which part of the research involves providing the
8 drug or procedure to patients as a part of healthcare delivery and evaluating whether outcomes
9 are any better in comparison to a control group. In my project, the NIH grant funds both the
10 development and administration of a gender-affirming healthcare educational and skills training
11 intervention for the purposes of research.

12 9. As we have researched and developed the healthcare education/skills training
13 delivery tool, Seattle Children's has drawn down expenses on a reoccurring basis from the
14 federal Payment Management System portal operated by the U.S. Department of Health &
15 Human Services. As of February 28, 2025, the project was in good standing and there was a
16 balance of \$78,300.91 on the grant.

17 10. On February 28, 2025, without warning, I received a notice from NIH that my
18 grant had been terminated. The termination letter is attached as Exhibit A to this declaration. The
19 only reason provided for terminating the grant was that "Research programs based on gender
20 identity are often unscientific, have little identifiable return on investment, and do nothing to
21 enhance the health of many Americans. Many such studies ignore, rather than seriously examine,
22 biological realities. It is the policy of NIH not to prioritize these research programs."

23 11. The termination letter did not cite to any journal or other scientific evidence of
24 any kind for its claim of a lack of scientific basis for my research. However, ample research
25 supports my work. There is significant research-based and peer-reviewed evidence, supported
26 also by my personal clinical experience, that transgender youth face serious disparities in sexual

1 health that improved healthcare and educational delivery tools could help remedy. The
2 termination letter could not be more inaccurate.

3 12. On March 4, 2025, NIH sent a second notice, a revised Notice of Award officially
4 de-obligating funding for my grant. The revised Notice of Award is attached as Exhibit B to this
5 declaration. The only additional rationale provided in this letter was that “This award related to
6 Transgender issues no longer effectuates agency priorities.” The de-obligated amount is
7 \$200,453. As issued, this means Seattle Children’s could be asked to pay back money for
8 expenses that were already incurred for study costs and salaries.

9 13. I see the termination of this grant as harmful to the health of the transgender and
10 gender-expansive patients I serve. It communicates that the healthcare needs and specific
11 healthcare vulnerabilities of “Transgender” youth do not matter. The termination letter specifies
12 that helping this vulnerable group of young people has “little identifiable return on investment”
13 because they do not match “biological realities.” Again, this is not accurate, nor scientific, as
14 transgender individuals are documented as being a part of humanity’s “biological reality” in
15 civilizations as far back as humans have documented them.

16 14. The termination of this grant also has potential to directly harm transgender youth
17 who serve as advisory board members on this grant. The termination of their work is a message
18 that their needs and contributions do not matter, nor does the sexual health of the larger
19 transgender youth population who disproportionately experience disparities in sexual health,
20 such as higher rates of HIV & STIs, intimate partner violence, and unintended pregnancy (the
21 costs of which are significant to both individuals affected and the broader public).

22 15. Termination of this grant will also directly affect members of my research team
23 who are early in their careers, thus diminishing the pipeline of scientific researchers committed
24 and credentialed to contribute breakthroughs in improving the lives of transgender youth. Several
25 members of the research team have based their decisions about where to live and work on the
26

1 opportunity to contribute to this research based on the promise of funding through the grant
2 award.

3 16. Without the remaining NIH grant funds, we will not be able to test, refine, and
4 finalize the healthcare and education/skills training delivery tool that we have been developing.
5 The work that we have done since September 2022 on this grant as well as prior formative work
6 that has been conducted since 2015 is likely to be lost. This loss of scientific knowledge, patient
7 and study-subject trust, and economic and professional support is in my opinion invaluable and
8 irreparable if allowed to go forward. No scrutiny of our specific project was provided and
9 speculative – as well as inaccurate – scientific reasoning was given in the termination letter.

10 I declare under penalty of perjury under the laws of the State of Washington and the
11 United States of America that the foregoing is true and correct.

12 DATED this 6th day of March 2025 at Baltimore, Maryland.

13 
14 KYM AHRENS, MD, MPH